

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

**Mail Stop Reissue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Attorney Docket No.

S1022/81088US01

First Named Inventor or
Application Identifier

Thierry MICHEL et al.

Original Patent Number

5,964,897

Original Patent Issue Date
(Month/Day/Year)

October 12, 1999

Express Mail Label No.

EV 292 462 245 US

APPLICATION FOR REISSUE OF: ☒ Utility Patent ☐ Design Patent ☐ Plant Patent

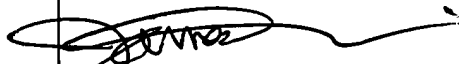
APPLICATION ELEMENTS (37CFR 1.173)

1. ☐ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification and Claims in double column
copy of patent format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☐ Reissue Oath/Declaration (original or copy)
(37 C.F.R. §1.175) (PTO/SB/51 or 52)
6. ☐ Power Of Attorney
7. Original U.S. Patent currently assigned ☐ Yes ☐ No
(If Yes, check applicable box(es))
☐ Written Consent of all Assignees (PTO/SB/53)
☐ 37 C.F.R. §3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer
Program (Appendix) or larger table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. ☐ paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all changes to
the claims. See 37 CFR 1.173(c)
11. ☐ Original U.S. Patent for surrender
 - a. ☐ Ribbonded Original Patent Grant
 - b. ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☒ Information Disclosure Statement (IDS)/PTO-1449
☒ Copies of IDS Citations
14. ☐ English Translation of Reissue Oath/Declaration (if
applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. ☒ Other: Application Data Sheet

18. CORRESPONDENCE ADDRESS	
Correspondence address below	
CUSTOMER NUMBER:	23628

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	James H. Morris, Reg. No. 34,681
SIGNATURE	
DATE	March 17, 2004